

ENVIRONMENTAL DOCUMENT QUALITY CONTROL

REVIEW CERTIFICATION

Project Name: _____	
Dist: _____	EA: _____ County/Route/KP/PM: _____
Document Type: _____	Name of Preparer: _____

<u>Type of Review</u>	<u>Reviewed by</u>	<u>Reviewer Signature</u>	<u>Date Completed</u>
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Technical Specialists
Review

- | | | | |
|-------------------|-------|-------|-------|
| • Biology | _____ | _____ | _____ |
| • Cultural | _____ | _____ | _____ |
| • CIA | _____ | _____ | _____ |
| • Visual | _____ | _____ | _____ |
| • Hazardous Waste | _____ | _____ | _____ |
| • Floodplain | _____ | _____ | _____ |
| • Water Quality | _____ | _____ | _____ |
| • Air Quality | _____ | _____ | _____ |
| • Noise | _____ | _____ | _____ |
| • Other | _____ | _____ | _____ |

Peer Review	_____	_____	_____
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Technical Editing Review	_____	_____	_____
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Legal Sufficiency Review	_____	<i>(No Signature Required)</i>	_____
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Supervisor Review	_____	_____	_____
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I hereby certify the required quality control reviews shown above have been satisfactorily completed in accordance with the _____ (District or Region) Quality Control Plan and that all substantive comments received have been addressed.

Chief, Environmental Management Branch

Date